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04/15/2004

MYERS BIGEL SIBLEY & SAJOVEC  
 PO BOX 37428  
 RALEIGH, NC 27627



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

**Cathy A. Schetzina** (Depositor's name)  
*Cathy A. Schetzina* (Signature)  
**May 13, 2004** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/289,346	04/09/1999	LINDA HANLEY-BOWDOIN	5051-458	8481

TITLE OF INVENTION: GEMINIVIRUS RESISTANT TRANSGENIC PLANTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HELMER, GEORGIA L	1638	800-279000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Myers Bigel Sibley & Sajovec, P/A.**

2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

North Carolina State University

Regents of the University of California

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Raleigh, North Carolina

Oakland, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies **10 @ \$30.00**

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **50-0220** (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

*Mary L. Miller* (Date) **May 13, 2004**

Mary L. Miller, Reg. No. 39,303

05/18/2004 WABRHM2 00000049 09289346

01 FC:2501  
 02 FC:1504  
 03 FC:8001

665.00 OP  
 300.00 OP  
 30.00 OP

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